OIR QOO 22/US/ BIRCH, STEWART, KOLASCH & BIRCH, LLP (FPA1-18)

PLEASE NOTE:

COMBINED DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO.

I TEMPE HOLE:
YOU MUST
COMPLETE THE
FOLLOWING:
_

FOR PATENT AND DESIGN APPLICATION

IS	1152-0276P				
fice address and citizenship are as					
ole inventor (if only one inventor					

Insert	Title:

As a below named inventor, I hereby declare that: my residence, post of stated next to my name; that I verily believe that I am the original, first and so

Insert Title:	is named below) or an original, matter which is claimed and for WIRELESS SEARCH	which a patent is sou		a below) of the subject		
Fill in Appropriate		1 11 16				
Information -	the specification of which is atta	iched hereto. If not a	ttached hereto,			
For Use Without	the specification v	was filed on 4/30		as		
Specification Attached:	United States Applica	tion Number NEW	; a	ind /or		
TACATOCA.	the specification w	was filed on		as PCT		
	International Applica	tion Number	;	and was		
	amended under PCT	Article 19 on	(if app	plicable)		
	including the claims, as amende	ed by any amendment	and the contents of the above in referred to above. which is material to patentability			
After United Mann. The Land Mannell Ma	my or our invention thereof, or our invention thereof or more on on sale in the United States of A been patented or made the subj country foreign to the United S assigns more than twelve month patent or inventor's certificate of America prior to this application	elieve the same was ever patented or described than one year prior to merica more than one ect of an inventor's ce- states of America on a s (six months for design on this invention has to n by me or my legal re-	er known or used in the United S in any printed publication in an this application, that the same v year prior to this application, the rtificate issued before the date of a application filed by me or my (ms) prior to this application, and been filed in any country foreign epresentatives or assigns, except	by country before my or was not in public use or at the invention has not f this application in any legal representatives or I that no application for to the United States of as follows.		
Insert Priority	I hereby claim foreign pricapplication(s) for patent or in	ority benefits under Ti ventor's certificate lis	tle 35, United States Code, §119 ted below and have also identing a filing date before that of the	9 (a)-(d) of any foreign fied below any foreign		
Information:	Prior Foreign Application (s	s) Patent		Priority Claimed		
(if appropriate)	2000-228905	Japan	July/28/2000	X		
110	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
The state of the s	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
Anna Control Anna	(Number)	(dodnii))	(,,,,	Yes No		
iii.	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
		(0,)	(Month/Day/Year Filed)			
	(Number)	(Country)	(Month/Day/Tear Flied)	Yes No □ □		
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
Insert Provisional Application(s):	I hereby claim the benefit application(s) listed below.	under Title 35, Unite	d States Code, §119(e) of any U	nited States provisional		
(if any)	(Application Number)		(Filing Date	:)		
Insert Requested Information: (if appropriate)	(Application Number) All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months (6 Months for Designs) Prior To The Filing Date of This Application: Application No. Date of Filing (Month/Day/Year)					
Insert Prior U.S. Application(s):	ed States application(s) n is not disclosed in the 35, United States Code, ty as defined in Title 37, of the prior application					
(if any)	(Application Number)	(Filing Dat		d, pending, abandoned)		

01R000 22 (A1-18)

1152-0276P

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Terrell C. Birch	(Reg. No. 19,382)	Raymond C. Stewart	(Reg. No. 21,066)
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Send Correspondence to:

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ij.						
I	Full Name of First or Sole	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
- Pri	Inventor: Insert Name of Inventor	Yoshiaki	SUMIDA	all'li e	1	Apr.9,2001
	Insert Date This	MINIARY SUMMAN				
1	Document is Signed		Residence (City, State & Country) CITIZENSHIP			
i i	Insert Residence Insert Citizenship	Chiba-shi, Chiba, Japan Japan				
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	Insert Post Office					hiba. Japan
genery.	Address	dress 20/0-11-110, Kalliatori-Cho, Midori-Ru, Chiba-Shi, Chiba, Ja				
1225 1225	Full Name of Second	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
rier	Inventor, if any:					
	see above	Residence (City, State	& Country)		CITIZENSHIP	
		nesidence (Oity, Otale	& Opanii y)		0171221101111	
		POST OFFICE ADDRE	SS (Complete Street Address	s including City, State & Country)		
		CIVENINIANAE	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
	Full Name of Third	GIVEN NAME	PAIVIILT NAIVIE	INVENTOR'S SIGNATURE		DAIC
	Inventor, if any					
	see above	Residence (City, State	& Country)		CITIZENSHIP	
				i I I Ch Otale & Carata	<u> </u>	
		POST OFFICE ADDRESS (Complete Street Address including City, State & Country)				
	Full Name of Fourth	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
	Inventor, if any					
	see above			<u> </u>	LOTIZENOUID	
		Residence (City, State	& Country)		CITIZENSHIP	
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		POST OFFICE ADDRE	SS (Complete Street Address	s including City, State & Country)		
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						Laure
	Full Name of Fifth	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
	Inventor, if any					
	see above	Residence (City, State & Country)		CITIZENSHIP	A	
		nesidence (only, state a country)				
		POST OFFICE ADDRESS (Complete Street Address including City, State & Country)				
		<u></u>				
		* DATE OF CLONIATURE				

Page 2 of 2 (USPTO Approved 3-90) (Revised 8-97) DATE OF SIGNATURE